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**FACSIMILE TRANSMISSION****CONFIDENTIAL****DATE:** September , 2004**CLIENT-MATTER No.:** 23340-09122

P 2 18

**To:**

NAME	FAX NO.	PHONE NO.
Commissioner for Patents - USPTO	(703) 872-9306	

**FROM:** Greg T. Sueoka      **PHONE:** (650) 335-7194

NUMBER OF PAGES WITH COVER PAGE: 4	ORIGINAL WILL NOT FOLLOW
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**MESSAGE:**

RE: Application No. 10/849,404      Filed: May 18, 2004  
First Named Inventor: Shaohui X. Pan

Attached is a Request for Withdrawal as Attorney (in triplicate) in the above referenced matter.

**CAUTION - CONFIDENTIAL**

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

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PLEASE CALL NUBIA MORAD AT (650) 943-5374 AS SOON AS POSSIBLE.**

23340/09122/DOCS/1466479.1

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/849,404
Filing Date	May 18, 2004
First Named Inventor	Shaoher X. Pan
Examiner	Unknown
Group Art Unit	2875
Attorney Docket Number	23340-09122

To:

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above- identified patent application. The client has been duly notified of this request for withdrawal and provided with all papers and property to which the client is entitled.

The reasons for this request are:

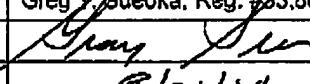
The client knowingly and freely assents to, and has requested, termination of the employment.

1.  The correspondence address is NOT affected by this withdrawal.
2.  Change the correspondence address and direct all future correspondence to:

Firm or Individual Name	Richard T. Ogawa Townsend & Townsend and Crew LLP				
Address	379 Lytton Avenue				
Address					
City	Palo Alto	State	CA	Zip	94301
Country	USA				
Telephone	(650) 326-2400	Fax	(650) 326-2422		

This request is made on behalf of myself and  
 all the attorneys/agents of record,  
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 the attorneys/agents associated with Customer Number 758

on whose behalf I have signed this request and on whose behalf I am authorized to sign. The request is enclosed in triplicate (including any attachments).

Name	Greg T. Sueoka, Reg. #33,800
Signature	
Date	9/20/04

NOTE: Withdrawal is effective when approved rather than when received.  
 Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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AS ATTORNEY OR AGENT**

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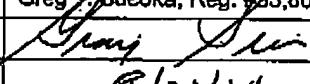
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Name	Greg T. Sueoka, Reg. #33,800				
Signature					
Date	9/25/04				

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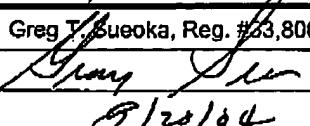
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Name	Greg T. Sueoka, Reg. #33,800				
Signature					
Date	9/21/04				

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